

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<input checked="" type="checkbox"/> FEE DETERMINATION			
<input checked="" type="checkbox"/> O&P.E. CLASSIFIER			
FORMALITY REVIEW	LC	1024	10/02/01
RESPONSE FORMALITY REVIEW	TZ	947	01/15/02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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jc-854
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